

SMI/MR Youth Major Violation Code of Conduct Report

(Must be returned to Conduct Code Officer by next business day.)

This youth has an SMI and/or MR classification and is scheduled to appear before the Youth Conduct Code Hearing Committee.

Youth's Name: _____ CLIENT ID# _____

Date of Major Violation Report: _____ Conduct Code Violation: _____

Date of Hearing: _____

Conduct Code Officer/Designee: _____

SMI/MR Representative/Advocate: _____

The following to be completed by a mental health professional:

I have reviewed the Major Violation Report and information contained in the youth's medical/assessment files. The results of my findings/recommendations are as follows:

_____ directly related to his/her mental illness or low cognitive abilities

_____ unrelated to the mental illness or low cognitive abilities

Details regarding this decision:

Signature of SMI/MR Youth Representative/Advocate

Date